			Departm	ent of	Public	Healt	h a	nd Social S	Bervices		10.	
			Food Es					ntal Health pection		Page _		f_2_
INSPECTION	RSN	TYPE GRADE	INSPECTIO	N DATE		ESTABL	LISH	MENT NAME				
Regular		- 2	09 122				1	MEXICAN	BAKERY			
Follow-up	V		TIME IN	TIME O		PERMIT			(pel			
Complaint		RATING	11:00 AM	Control of the Control				tuA, Jos	>C[ff			
Investigation A SANITARY PERMIT Other: 170002160					).	LOCATI	ОИ	(Address)	y DR., HARMON			
					ONE	61 CD				W 1 = 0		
				TELEPHO								EGORY
	-								HEALTH INTERVEN	TIONS	2	
in water			THE RESERVE AND ADDRESS OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS			A CONTRACTOR OF THE PARTY OF			n appropriate box for COS and/or R			
IN = In con	pliance								during inspection R = Repeat viol		= Deme	rit points
Complianc	e Stat	us			SR			pliance Statu				RIPT
		THE RESERVE THE PARTY OF THE PA	ervision						otentially Hazardous Food (7			
1 (N) OU	T	Person in charge knowledge, and p	present, demonstrates			6			O Proper cooking time and temper O Proper reheating procedures for		-	6
2			yee Health			$\dashv$			O Proper cooling time and tempera		+	6
2 (1) 00	Т		areness, policy present		Т	6			Proper hot holding temperatures		+	6
3 N) OU	Т	Proper use of rep	orting, restriction & exclu	nois		6	20	IN OUT N/A	Proper cold holding temperature	3		6
			enic Practices				21 (	IN OUT N/A N	O Proper date marking and disposi	tion		6
4 (N) OU	T N/A	N/O Proper eating, tas	sting, drinking, beteinut, o	or		6			Consumer Advisory			
5 (IN ) OU	T N/A		n eyes, nose, and mouth		+-+	6		1	T			7
~			amination by Hands				22	IN OUT (VA)	Consumer Advisory provided for undercooked foods	LSM OL	1 1	6
6 (N) OU	T N/A	N/O Hands clean and				6						
7 (IN) OU	T N/A	N/L1 I	stact with ready-to-eat for te method property follow		1 1	6	ligie.		Highly Susceptible Popula		-	-
. 5			ashing facilities supplied		+-+		23	IN OUT (NA)	Pasteurized foods used; prohibit offered	ad foods not		6
8 (N) OU	r 	accessible				6	500		Chemical			_
1			red Source				24	IN OUT (VA)	Food additives: approved and pri	operly used		6
9 (IN) OU			m approved source			6		55.65				- 0
10 IN OU			proper temperature dition, safe, and unadulte	unted	+	6	25	IN) OUT	Toxic substances properly identifused	ied, stored,		6
	73		available: shellstock tag		++			Co	informance with Approved P	meadures	-	
12 IN OU	(NA)	parasite destruction	on	300		6	20	IN OUT (PA)	Compliance with variance, specia			7.
. 0			m Contamination				20	IN OUT (MA)	process, and HACCP plan			6
13 N OUT		Food separated a	nd protected aces: cleaned & sanitized	_	+	6	.3:3:2.	Risk factors a	are improper practices or procedure	s identified a	s the mo	st
Proper disposition of returned, previously				<del>'</del>	1	6	prevalent contributing factors of roodborne litness or injury. Publ					
19 (11) 001		served, reconditio	ned, and unsafe food			6			are control measures to prevent too	IDOME Ilines	s or injur	<u>y.</u>
								CTICES				
Mark "	Y" in ho	Good Retail Pract	ices are preventative me	asures to c	control the	e introduc	tion o	of pathogens, che	emicals, and physical objects into fo	ods.		
Mark "X" in box: If numbered item is not in compliance and/or if COS ompliance Status					R							
			d and Water						Proper Use of Utensils	8	41.00	
	Pasteur	ized eggs used where n	equired		$\vdash$	1	40	and the same of the same of	nsils: properly stored			1
28	Water a	nd Ice from approved s	ource		1 1	2	41	Utensils, e	equipment and linens: properly store	d, dried,		1
29	Variance	e obtained for specialize	ed processing methods		$\vdash$	1	42	Company of the Compan	single-service articles: properly sto	ored, used		1
			erature Control	The same		1000	43		ed properly			1
			adequate equipment for			1			Utensils, Equipment and Ve			
		dure control od property cooked for i	not holding	-	+	1	44		nonfood-contact surfaces cleanable constructed, and used	property		1
				_	+	<b></b> -	40		ing facilities: installed, maintained,	used; test		
		d thawing methods use		_			45	strips				1
33	Thermo	meter provided and acc	urate entification			1	46	Nonfood-c	ontact surfaces clean			1
34	Food pro	operly labeled; original o				<b>4</b> 6	47	Hot & cold	Physical Facilities water available, adequate pressure	11-0-120		2
				48		installed; proper backflow devices			2			
		rodents, and animals n				2	49	Sewage at	nd wastewater properly disposed			2
		ontamination prevented during food peparation, storage &				1						2
$\rightarrow$	display Persona	onal cleanliness			+-+							
	Personal cleanliness Wiping cloths: properly used and stored				1							
	-	fruits and vegetables					53		ventilation and lighting; designated			1
			d the above violation	1 //					Documents and Placard	is		
l am	awar	e of the corrective	measures that sha	ll be take	en.	ALL	54		ermit, Health Certificates valid and	posted		2
arson in Ch	arge (P	rint and Sign) wf/	NO STA. EL	ENA	Y	A		0	Pate: 9/22/17			
EH Inspecto	r (Print	and Sign)	NI NAMARRO,	P-0.14	т	10	7		WEG !	IFo	low-up	Date
			עשרותיות ועו	Crito	4	1	2	F	ollow-up (Circle one): YES	NO) F	N/A	+
Rev	: 08.27.	15	V	White: DPHS	S/DEH	/Yellow: F	Food	Establishment		31 Series V	9	40,000

## Department of Public Health and Social Services Division of Environmental Health Food Establishment Inspection Report Page 2 of 2 LOCATION (Address) ESTABLISHMENT NAME 2301 ARMY DR., HARMON AMERICAN BAKERY INSPECTION DATE PERMIT HOLDER ISANITARY PERMIT NO. CHUA, JOSEPH 09/22/2017 170002160 **TEMPERATURE OBSERVATIONS** Item/Location Temperature (\* F) Temperature (° F) CORRECT ITEM NO. **OBSERVATIONS AND CORRECTIVE ACTIONS** BY DATE Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code. A FOLLOW-UP INSPECTION WAS CONDUCTED TO DAY FOR PROVIOUS INSPECTION DATED DA/21/17 WHICH RESULTED IN A GRADE/PATING OF 12/B. ALL PREVIOUS VIO-LATIONS OF MEMS # 2,36, MIND 50 WERE CORRECTED EXCEPT FOR ITEM # 51 WHICH REMAIN UNCORRECTED. FACILITY HITS UNTIL 10/21/17 TO CORRECT CAID NON-CRITICAL MEM. RETRIEVED "B"PLACTED NO. 00587. POSTED "A" PLACARD NO. 02513. BRIEFED PIC, RUTIND STA. FIEND DR., ON ABOVE INFORMATION. Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections. Person in Charge (Print and Sign) RUFINO C. STA. ELEVA DEH Inspector (Print and Sign) ELANI NAVARRO, EPHO I

Rev: 08.27.15

White: DPHSS/DEH

Yellow: Food Establishmer